

### **Important Privacy Notice**

Federal Rule of Civil Procedure 5.2 prohibits litigants in a non-habeas proceeding from submitting documents that contain personal information. Unless the Court orders otherwise, personal identifying information in Court filings must be limited as follows:

- Social security numbers, taxpayer-identification numbers, and financial **account numbers must include only the last four digits** (e.g., xxx-xx-1234)
- Birth dates must **include the year of birth only** (e.g., xx/xx/2000)
- Names of persons under the age of 18 must be indicated by **initials only** (e.g., A.B.)

You are responsible for protecting the privacy of this information in your filings. If your documents, including attachments, contain any information that does not comply with this rule, please black out that information before sending your documents to the Court.

**UNITED STATES DISTRICT COURT  
EASTERN DISTRICT OF PENNSYLVANIA**

Avery James Hardaway

**REC'D MAY 14 2024**

*(In the space above enter the full name(s) of the plaintiff(s).)*

**- against -**

Warby Parker  
Suburban Square

**COMPLAINT**

Jury Trial: ☒ Yes ☒ No

(check one)

*(In the space above enter the full name(s) of the defendant(s). If you cannot fit the names of all of the defendants in the space provided, please write "see attached" in the space above and attach an additional sheet of paper with the full list of names. The names listed in the above caption must be identical to those contained in Part I. Addresses should not be included here.)*

**I. Parties in this complaint:**

- A. List your name, address and telephone number. If you are presently in custody, include your identification number and the name and address of your current place of confinement. Do the same for any additional plaintiffs named. Attach additional sheets of paper as necessary.

Plaintiff

Name

Street Address

County, City

State & Zip Code

Telephone Number

Avery J. Hardaway

412 W. Berks St.

Philadelphia, Philadelphia

Pennsylvania 19122

617-968-7585

- B. List all defendants. You should state the full name of the defendants, even if that defendant is a government agency, an organization, a corporation, or an individual. Include the address where each defendant can be served. Make sure that the defendant(s) listed below are identical to those contained in the above caption. Attach additional sheets of paper as necessary.

Defendant No. 1      Name Worby Parker - Suburban Square  
                                  Street Address 66 Coulter Ave  
                                  County, City Montgomery, Ardmore  
                                  State & Zip Code Pennsylvania 19063

Defendant No. 2      Name \_\_\_\_\_  
                                  Street Address \_\_\_\_\_  
                                  County, City \_\_\_\_\_  
                                  State & Zip Code \_\_\_\_\_

Defendant No. 3      Name \_\_\_\_\_  
                                  Street Address \_\_\_\_\_  
                                  County, City \_\_\_\_\_  
                                  State & Zip Code \_\_\_\_\_

Defendant No. 4      Name \_\_\_\_\_  
                                  Street Address \_\_\_\_\_  
                                  County, City \_\_\_\_\_  
                                  State & Zip Code \_\_\_\_\_

## II. Basis for Jurisdiction:

Federal courts are courts of limited jurisdiction. Only two types of cases can be heard in federal court: cases involving a federal question and cases involving diversity of citizenship of the parties. Under 28 U.S.C. § 1331, a case involving the United States Constitution or federal laws or treaties is a federal question case. Under 28 U.S.C. § 1332, a case in which a citizen of one state sues a citizen of another state and the amount in damages is more than \$75,000 is a diversity of citizenship case.

- A. What is the basis for federal court jurisdiction? (check all that apply)

☒ Federal Questions

☒ Diversity of Citizenship

- B. If the basis for jurisdiction is Federal Question, what federal Constitutional, statutory or treaty right is at issue?

Chapter 41 - Fraudulent practices. Chapter 57 - Wiretapping and electronic surveillance

C. If the basis for jurisdiction is Diversity of Citizenship, what is the state of citizenship of each party?

Plaintiff(s) state(s) of citizenship Pennsylvania

Defendant(s) state(s) of citizenship Pennsylvania

### III. Statement of Claim:

State as briefly as possible the facts of your case. Describe how each of the defendants named in the caption of this complaint is involved in this action, along with the dates and locations of all relevant events. You may wish to include further details such as the names of other persons involved in the events giving rise to your claims. Do not cite any cases or statutes. If you intend to allege a number of related claims, number and set forth each claim in a separate paragraph. Attach additional sheets of paper as necessary.

A. Where did the events giving rise to your claim(s) occur? 66 Calter Ave Ardmore PA 19003 and the location where the lenses/frames were made.

B. What date and approximate time did the events giving rise to your claim(s) occur? April 2022 - September 2022

C. Facts: Eye exams. Ordered multiple pairs of corrective eye-glasses (with frames) along with contact lenses. Returned all but one pair of glasses. Ordered a year supply of contact lenses. Kept the eyeglass frames named James.

- Eyeglass prescription misdiagnosis. My corrective lenses should have same prescription to correct them collectively like my contact prescription.
- Have reason to believe that fiber optic imaging has been placed on lenses without consent to have me under surveillance. Upon arriving in Ardmore, business owners and towns people seem to know my arrival and whereabouts. Was in Ardmore for work - work with clients behind closed doors.

Warby Parker Suburban Square, Massage Envy Ardmore, wherever the lenses were made.

The optometrists, store associates and whoever has access to the fiber optic footage within my eyeglass frames.

Saw that this technology exist on the show titled the Pentameter

What happened to you?

Who did what?

Was anyone else involved?

Who else saw what happened?



**IV. Injuries:**

If you sustained injuries related to the events alleged above, describe them and state what medical treatment, if any, you required and received.

- Possible eyesight deterioration due to a misdiagnosis
- Loss of privacy with alleged fiber optics within eyeglass frames
- Possible discrimination due to known where abouts
- Financial loss

**V. Relief:**

State what you want the Court to do for you and the amount of monetary compensation, if any, you are seeking, and the basis for such compensation.

- Lenses made on sight
- Thorough investigation of company in correlation to fiber optic implants. Eye glass lenses came from out of state. Eye glass lenses are not made on sight anymore.
- Compensation for "James" frame collection with lenses without fiber optic footage / surveillance
- Year supply of contact lenses
- $200,000 + 200,000 = \$400,000$
- About 2 years now with possible fiber optic surveillance within my eyeglasses
- Investigation of any phone applications connected to fiber optic footage.
- Have another reason to believe eyeglass surveillance as I am sure that a camera was somehow implanted within my cranium.

I declare under penalty of perjury that the foregoing is true and correct.

Signed this 14 day of May, 2024.

Signature of Plaintiff

Mailing Address

Telephone Number

Fax Number (if you have one)

E-mail Address

Gregory J. Hardaway  
412 W Berks St  
Philadelphia, PA 19102  
Apt 1B

617-968-7585

N/A

everyhardaway@gmail.com

**Note:** All plaintiffs named in the caption of the complaint must date and sign the complaint. Prisoners must also provide their inmate numbers, present place of confinement, and address.

For Prisoners:

I declare under penalty of perjury that on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, I am delivering this complaint to prison authorities to be mailed to the Clerk's Office of the United States District Court for the Eastern District of Pennsylvania.

Signature of Plaintiff: \_\_\_\_\_

Inmate Number \_\_\_\_\_